



From the office of
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Health Care Reform & Seniors

Frequently Asked Questions on the Affordable Health Care for America Act

1) Will the Medicare reforms in the health reform bill affect my benefits?

NO. The Medicare cost savings in the House bill will affect insurance companies and health care providers, not seniors. These payment reforms are designed to make Medicare more efficient and less wasteful. They are achieved by reducing excessive profits that private insurance companies are making off Medicare Advantage; requiring hospitals, doctors, and other providers to be more efficient; calling for more coordinated care; and cracking down on waste, fraud and abuse. The AARP has concluded that none of these savings will hurt seniors or cut their benefits.

2) Will the health reform bill help me afford my prescriptions?

YES. Right now, evidence suggests the “donut hole” coverage gap in Medicare Part D reduces seniors’ use of doctor-prescribed drugs by an average of 14%. H.R. 3962 will begin closing the donut hole immediately by \$500 for all enrollees, and provides an immediate 50% discount on brand-name drugs purchased in the donut hole, potentially savings seniors thousands of dollars a year. The donut hole itself will shrink every year until it is eliminated entirely in 2019.

3) Will the health reform bill make it easier for me to stay healthy?

YES. We all agree that every senior should have access to preventive care, yet one in five women age 50 or over did not have a mammogram in the last two years, and 38% of adults age 50 or over have never had a colonoscopy – with costs often a factor. H.R. 3962 will eliminate all co-pays for preventive care, opening access to the preventive services that save money and lives.

4) Will the health reform bill help me get access to a doctor I can trust?

YES. Right now, about 12 million seniors lack access to a primary care doctor in their community. With historic investments in the medical workforce and innovations in coordination of care, H.R. 3962 will ensure that more seniors have access to a qualified primary care doctor who can recommend the most effective treatments for every individual.

5) Will the health reform bill help keep Medicare secure?

YES. Right now, the Medicare Trust Fund is projected to be exhausted in just eight years, in 2017, which could cause cuts to services and care. H.R. 3962 extends the solvency of the Medicare Trust Fund by five years and, by reshaping the payment system from a quantity-based to a quality-based system of care, will help ensure Medicare's financial viability for the long term.

5) Will the bill really take end-of-life choices away from seniors and their families?

NO. There is no mandate for counseling to prepare seniors and their families for decisions related to end-of-life care. The only mandate is for Medicare to pay for the consultation between patients and doctors to help families make these decisions. AARP supports inclusion of this planning provision, which is entirely voluntary.

6) Will the bill give government health care to illegal immigrants?

NO. The bill makes no change whatsoever to the current laws barring undocumented immigrants from all federal benefits, and explicitly states that it will not subsidize coverage for illegal immigrants. The bill requires plans in the Exchange to offer culturally and linguistic appropriate services, because many legal residents and citizens of the U.S. speak other languages and deserve equal access to health information.

7) Will the bill give the federal government access to my private financial or medical information?

NO. The section cited in mass emails has nothing to do with accessing your personal financial information. This section promotes administrative simplification—for example, being able to look up your insurance coverage and determine how much you will pay and which provider your insurance will accept, at the point of service. This saves money and gives you information about what you will owe at the front end, rather than being denied or getting a surprise bill from your insurance company weeks after your treatment. Nothing in the bill will give the government access to your bank account.